Central Marin Sanitation Agency
Application for Grease Interceptor Plan Review or Exemption Letter

Food service establishments (FSE) that require a grease interceptor plan review or exemption letter from Central Marin Sanitation Agency (CMSA) shall complete the following application and provide the required documents at the time of request. Applications will not be processed until CMSA receives all required documents. Plumbing plans, restaurant menus and restaurant equipment specification sheets shall be submitted to CMSA in hardcopy or electronically at: es@cmsa.us. Please allow up to **30 calendar days** for plan review after submission of all required documentation.

FACILITY INFORMATION	
BUSINESS NAME (DBA):	DAYS & HOURS OF OPERATION:
BUSINESS ADDRESS:	
BUSINESS CONTACT (Name & Title):	BUSINESS TELEPHONE:
MENU TYPE (e.g. Burger and fries):	EXPECTED NUMBER OF MEALS SERVED PER DAY:
FOODWARE (Select one): ☐ Reusable plates and utensils washed on site ☐ Disposable plates and utensils	RESTAURANT SEATING CAPACITY: BUILDING OCCUPANCY:
BILLING ADDRESS (To be used for sending all invoices and correspondence): Check this box if you would like to use the BUSINESS ADDRESS listed above: ☐	
BILLING NAME (If different from business name):	BILLING TELEPHONE:

LEGAL OWNERSHIP	
NAME and TITLE:	
MAILING ADDRESS:	
TELEPHONE:	EMAIL:

REQUEST TYPE (Select all that apply)		
☐ New FSE	☐ Kitchen remodel (existing FSE)	☐ Change of ownership only (i.e. NO new menu items, NO kitchen updates)
☐ Grease interceptor plan review	☐ Grease interceptor exemption letter	

REQUIRED DOCUMENTS

☐ Submit one (1) set of plumbing plans (i.e. water, gas, waste, vent and equipment schedules).
☐ Submit food and drink menu.
☐ Include manufacturer specification sheets for all kitchen equipment (existing AND new equipment). Include cross-key specification sheets with the equipment listed in plans.

GREASE INTERCEPTOR INFORMATION (You may leave this section blank if unknown)	
MANUFACTURER:	MODEL:
FLOW RATE (GPM):	GREASE CAPACITY (LBS):
INSTALLATION DATE (or planned installation date):	

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person of persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

NAME (Print):	SIGNATURE:	DATE: